PTO/SB/21 (02-04) Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE aperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/632,019 **TRANSMITTAL** Filing Date 07/30/2003 **FORM** First Named Inventor Canaan Ng Art Unit 2623 (to be used for all correspondence after initial filing) **Examiner Name** Unknown Attorney Docket Number 8 101278.55223US Total Number of Pages in This Submission

ENCLOSURES (Check all that anniv)						
Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)	Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Remarks	After Allowance communication to Technology Center (TC)  Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):  Statement under 37 CFR 3.73(b); Copies of Assignment Documents; Return Receipt Postcard.				
	TURE OF APPLICANT, ATTORNEY, O	PR AGENT				
Firm Jonathan/M. Lindsay Reg. No. 45,810 or Individual name						
Signature / / /	Sould					
Date 02/02/2005						
CERTIFICATE OF TRANSMISSION/MAILING						
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.						
Typed or printed name  Maria-N. Sausedo						
Signature	ul	Date 02/02/2005				

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vork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004 Complete if Known Fees pursuant to the Consolidated Appropriations Act, 200 HR 88 Application Number 10/632,019 TRANSM Filing Date 07/30/2003 For FY 2005 FEB 0 7 2005 First Named Inventor Canaan Ng **E**xaminer Name Unknown Applicant claims small entity status. Sec37 **CFR 1.27** Art Unit 2623 BLOGMARY TOTAL AMOUNT OF PAYMENT 101278.55223US Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order None Check Credit Card Other (please identify): Deposit Account Deposit Account Number: 05-1323 Deposit Account Name: Crowell & Moring LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. <u>Indep. Claims</u> Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets **Extra Sheets** Number of each additional 50 or fraction thereof Fee Pald (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Registration No. 45,810 Signature Telephone 949-263-8400 (Attorney/Agent) Name (Print/Type) Jenathan M. Lindsay Date 02/02/2005

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Under the

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\*Total of

forms are submitted.

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# REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/632,019
Filing Date	July 30, 2003
First Named Inventor	Canaan Ng
Art Unit	2623
Examiner Name	Unknown
Attorney Docket Number	101278.55223US

A Power of Attorney is submitted herewith.    OR										
OR  ☑ I hereby appoint the practitioners associated with the Customer Number:  ☑ Please change the correspondence address for the above-identified application to:  ☑ The address associated with Customer Number:  ☑ The address associated with Customer Number:  ☐ Individual Name  Address  City  State  Zip  Country  Telephone  Fax  I am the:  ☐ Applicant/Inventor.  ☑ Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Mark L. Niu  Date  12 / 14 / 200 +  Telephone (949) 679-8800	I hereby re	voke all pre	evious powers of	attornev given i	in the a	above-i	den	tified applic	ation.	
I hereby appoint the practitioners associated with the Customer Number: 23911    Please change the correspondence address for the above-identified application to:   The address associated with Customer Number: 23911    OR	A Pov	ver of Attorn	ey is submitted he	rewith.						
The address associated with Customer Number:  OR  Firm or Individual Name  Address  City  State  Telephone  Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name  Mark L. Niu  Date  12/14/2004  Telephone  12/14/2004  Telephone  139911										
Customer Number:  OR  Firm or Individual Name  Address  City  State  Zip  Country  Telephone  Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name  Mark L. Niu  Date  12/14/204  Telephone  [949) 679-8800	✓ Please	e change the	e correspondence a	address for the a	bove-id	dentified	l ap	plication to:		
Firm or Individual Name  Address  City State Zip  Country  Telephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature Mark L. Niu  Date 12/14/2004 Telephone (949) 679-8800					2391	1				
Address  City State Zip  Country  Telephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature Mark L. Niu  Date 12/14/2004  Telephone (949) 679-8800	OR									•
City State Zip  Country  Telephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature Mark L. Niu  Date 12/14/2004  Telephone (949) 679-8800	1 1 1									
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Telephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature Mark L. Niu  Date 12/14/2004 Telephone (949) 679-8800										
Telephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name  Mark L. Niu  Date  12/14/2004  Telephone  (949) 679-8800	City				State				Zip	
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name  Mark L. Niu  Date  12/14/2004  Telephone (949) 679-8800									·	
Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name  Mark L. Niu  Date  12/14/2004  Telephone (949) 679-8800	Telephone					Fax				
Signature Mark L. Niu  Date 12/14/2004 Telephone (949) 679-8800	App Ass	ignee of rec	ord of the entire int							
Signature         Mark L. Niu           Date         12/14/2004           Telephone         (949) 679-8800	State	ement under		•				• • • •		
Name       Mark L. Niu         Date       12/14/200+       Telephone       (949) 679-8800	Signature	11			or As	signee	ot R	ecord		
Date 12/14/2004 Telephone (949) 679-8800		Ì	iain - M	w				<del>_</del>		<u> </u>
12 14 200 4			114/2004	·	Te	lephon	e	(949) 679-8800	)	· · · ·
dispetter in required, and helpful	NOTE: Signature	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one					forms if more than one			

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR	<u>3.73(b)</u>
Applicant/Patent Owner: Consistent Capital, LLC	
Application No./Patent No.: 10/632,019 Filed/Issue Date: 07/3	0/2003
Entitled: HIGHLY AUTOMATED SYSTEM FOR MANAGING HEDGE FUNDS	
Consistent Capital, LLC , a limited liability comp (Name of Assignee) , Type of Assignee, e.g.,	corporation, partnership, university, government agency, etc.)
states that it is:  1.   the assignee of the entire right, title, and interest; or	
an assignee of less than the entire right, title and interest.  The extent (by percentage) of its ownership interest is %	
in the patent application/patent identified above by virtue of either:	
A   An assignment from the inventor(s) of the patent application/patent id in the United States Patent and Trademark Office at Reel	
OR  B. A chain of title from the inventor(s), of the patent application/patent ide below:	entified above, to the current assignee as shown
1 From: To:	
1. From: To: To: The document was recorded in the United States Patent and Tr	rademark Office at
Reel, Frame, or for which	a copy thereof is attached.
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3. From: To:	
The document was recorded in the United States Patent and Ti Reel, Frame, or for wh	rademark Office at nich a copy thereof is attached.
Additional documents in the chain of title are listed on a supplement	atal sheet.
Copies of assignments or other documents in the chain of title are attach [NOTE: A separate copy (i.e., a true copy of the original assignment documents in accordance with 37 CFR Part 3, if the assignment is to be MPEP 302.08]	cument(s)) must be submitted to Assignment
The condensition of fight on AMI is a condited below to a subscience of a conditional	16 of Al
The undersigned (whose title is supplied below) is authorized to act on beha	12/14/2004
Signature	Date
Mark Nin	(949)679-8800
Printed or Typed Name	Telephone Number
C.O.O. / General Counsel	

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
Name of conveying party(ies):		2. Name and addres	s of receiving party(ies)		
Canaan Ng		Name: Consisten			
Dr. Rolf Fischer		144110.			
		Internal Address:			
Additional name(s) of conveying party(es) attach	ed? Yes No	· · · · · · · · · · · · · · · · · · ·			
3. Nature of conveyance:					
✓ Assignment	lerger				
	hange of Name	Street Address: 8	3 Corporate Park		
			Suite 300		
Other		<b>I</b>	04 00000		
07/30/03; 07/30/03		City: Irvine	State: <u>CA</u> Zip: <u>92606</u>		
Execution Date:		Additional name(s) & a	address(es) attached? Yes V No		
4. Application number(s) or patent num	ber(s):				
If this document is being filed togethe	er with a new applic	ation, the execution d	ate of the application is: 7/30/03		
A. Patent Application No.(s)					
5. Name and address of party to whom	correspondence		plications and patents involved: 1		
concerning document should be maile	ed: F				
Name: Mark Niu		7. Total fee (37 CFR	3.41)\$ <u>40.00</u>		
Irell & Manella LLP		✓ Enclosed			
internal Address.		Authorized to	be charged to deposit account		
		7.44.70.12.54.45			
		8. Deposit account n	umher:		
Street Address: 840 Newport Center Dr	ive	o. Deposit account in	difficer.		
Street Address.		09-0946	j		
Suite 400			•		
City: Newport Beach State: CA Zip: 9	2660				
DO NOT USE THIS SPACE					
9. Signature.		<del></del>			
Mark Niu Don No 50 075	11	1.1 11:	July 30, 2003		
Mark Niu, Reg. No. 52,075  Name of Person Signing		Signature	Date		
	f nages including cover	sheet, attachments, and de	[_J_		
, can nombor o			hicagoria		

Attorney's Docket No.: 157989-0003



## ASSIGNMENT

In consideration of good and valuable consideration, the receipt of which is hereby acknowledged, we, the undersigned:

#### Canaan Ng

#### Dr. Rolf Fischer

hereby sell, assign, and transfer to:

### Consistent Capital, LLC

a California limited liability company, having a principal place of business at 8 Corporate Park, Suite 300, Irvine, California 92606 ("Assignee"), and its successors, assigns, and legal representatives, the entire right, title, and interest for the United States and all foreign countries, in and to any and all inventions and improvements that are disclosed in the application for the United States patent that has been executed by the undersigned prior hereto or concurrently herewith on the dates indicated below and is entitled:

#### HIGHLY AUTOMATED SYSTEM FOR MANAGING HEDGE FUNDS

and in and to said application and all divisional, continuing, continuation-in-part, substitute, renewal, reissue, and all other patent applications that have been or shall be filed in the United States and all foreign countries on any of said inventions and improvements; and in and to all original and reissued patents that have been or shall be issued in the United States and all foreign countries on said inventions and improvements; and in and to all rights of priority resulting from the filing of said United States application, and in all subsequent PCT and foreign applications claiming priority to the United States application;

agree that said Assignee may apply for and receive a patent or patents for said inventions and improvements in its own name; and that, when requested, without charge to, but at the expense of, said Assignee, its successors, assigns, and legal representatives, to carry out in good faith the intent and purpose of this Assignment, the undersigned will execute all divisional, continuing, continuation-in-part, substitute, renewal, reissue, and all other patent applications on any and all said inventions and improvements; execute all rightful oaths, assignments, powers of attorney, and other papers; communicate to said Assignee, its successors, assigns, and representatives all facts known to the undersigned relating to said inventions and improvements and the history thereof; and generally assist said Assignee, its successors, assigns, or representatives in securing and maintaining proper patent protection for said inventions and improvements and for vesting title to said inventions and improvements, and all applications for patents and all patents on said improvements, in said Assignee, its successors, assigns, and legal representatives; and covenant with said Assignee, its successors, assigns, and legal representatives that no assignment, grant, mortgage, license, or other agreement affecting the rights and property herein conveyed has been made to others by the undersigned, and that full right to convey the same as herein expressed is possessed by the undersigned.



Each Inventor: Please Sign and Date Below:

Each inventor: Please also list the date that you signed the accompanying DECLARATION & POWER OF ATTORNEY

7-30-03	Cereella	7-30-03
Date	Name: Canaan Ng	Date
7-30-03	Memly.	7-30-03
Date	Name: Dr. Rolf Fischer	Date

Assignment Document Return Address: Irell & Manella LLP 840 Newport Center Drive, Suite 400 Newport Beach, CA 92660 Telephone: 949-760-0991